

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/583012

FILING DATE
09 FEB 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		2		/		
4		2		/		
5		2		/		
6		2		/		
7		2		/		
8		2		/		
9		2		/		
10		2		/		
11	/		/			
12		1		/		
13		2		/		
14		2		/		
15		2		/		
16		1		/		
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50						
TOTAL IND.	2		1			
TOTAL DEP.	16	←	15	←		
TOTAL CLAIMS	18	[REDACTED]	16	[REDACTED]		

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.			↓			
TOTAL DEP.		←	↓			
TOTAL CLAIMS		[REDACTED]	[REDACTED]			